PTO/SB/17



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2831A

CHE III	Application Number	09/928,737				
ΓRANSMITTAL FORM	Filing Date	August 13, 2001				
	First Named Inventor	Son Ky Quan et al.				
	Group Art Unit	2831				
	Examiner Name	Hung V. Ngo				
Total Number of Pages in this 8		SC09785T CD1				

Total I	Number of Pages in this Submission 8		Attorney Docket Numb	er	SC09785T CD1	A 280	
ENCLOSURES (check all that apply)							
X Fee Tr	ansmittal Form		Assignment Papers (for an Application)		1	Allowance	
	Fee Attached		Drawing(s)		,	nunication to Group Communication to	
X Amend	dment/Reply		Licensing-Related p	apers	Appeal Group (Appeal	eals and Interferences Communication to Notice, Brief, Reply	
	After Final		Petition		Brief) Proprie	tary Information	
	Affidavits/Declaration(s)		Petition to Convert to		Status L copies	etter with appropriate	
X Extens	sion of time Request		Provisional Application Power of Attorney, Revocation, Change of Correspondent		below)	closure(s) (please identify	
Expres	ss Abandonment Request		Address	~		ciate Power of Attorney	
Inform	nation Disclosure Statement		Terminal Disclaime	ŗ			
Certifi Docum	ed Copy of Priority nents		Request for Refund				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm or Individual	Patricia S. Goddard			Regist	tration No.	35,160	
Signature Hoddard 4/27/02							
Date 7/							
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage thereon, as first-class mail, in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on the date listed below: Typed or printed Anne Castle							
name			<u> </u>				
Signature	Atime!	(Ú	SH		Date	U/27/08	



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FEE TRANSMITTAL

Patent fees are subject to annual revision

Complete if Known

Application Number 09/928,737

Filing Date August 13, 2001

First Named Inventor Son Ky Quan

Examiner Name Hung V. Ngo

Group Art Unit 2831

Attorney Docket Number SC09785T CD1

TOTAL AMOUNT OF PAYMENT	(\$)110.00	Attorney Docket	Number		SC0978	5T CI	D1 .	280
METHOD OF PAYMENT					FEE (CALC	ULATION (continued)	,
1 X The Commissioner is hereby authorized to charge indicated fees and				3. ADDITIONAL FEES				
credit any overpayment to: Deposit Account Number 13-4773			Large Entity		Sm Ent			
Deposit Account Name Motorola, Inc.		Inc.	Fee	Fee	Fee	Fee		
	Code	(\$)	Code	(\$)	Fee Description			
X Charge Any Additional Fee required under 37 CFR 1.16 and 1.17			105	130	205	65	Surcharge - late filing fee or oath	
Applicant claims small entity statu	s. See 37 CFR 1.27		127 139	50 130	227 139	25 130	Surcharge – late Provisional filing Non-English specification	
Approant Causes sinan Causy states. Sec 37 Ct N 1.27			147	2520	147	2520	For filing a request for ex parte	
			115	110	215	55	Extension for reply within first	
FEE CALCULATION			116	400	216	200	month Extension for reply within second month	X
			117	920	217	460	Extension for reply within third month	
1. BASIC FILING FEE			118	1440	218	720	Extension for reply within fourth month	
			128	1960	228	980	Extension for reply within fifth month	
Larg Entit Small Entit			119	320	219	160	. Notice of Appeal	
e y y Foe Foe Fee Foe		•	120	320	220	160	Filing a brief in support of an appeal	
Code (\$) Code (\$)		Fee Paid	121	280	221	140	Request for oral hearing Petition to institute a public use	
		,		1510	138	1510	proceeding	
101 740 201 370	Utility filing fee		140 123	110 50	240 123	55 50	Petition to revive - unavoidable	
SUBTOTAL (1) (\$) 0.00				50	123	30	Processing fee under 37 CFR 1.17(q)	
2. EXTRA CLAIM FEES			126	180	126	180	Submission of IDS	
Previously		from	581	40	581	. 40	Recording each patent assignment	
Paid** Total Claims	Claims bel	ow Fee Paid	146	740	246	370	per property (times number of properties Filing a submission after final	· —
Independent Claims							rejection (37 CFR § 1.129(a))	
Muhinta Damandana	<u> </u>		149	740	249	370	For each additional invention to be	
Multiple Dependent Larg Entit Smal Entity	280	2] = []	179	740	279	370	examined (37 CFR § 1.129(b)) Request for Continued Examination	
e y i			.,,	740	2//	370	-	~" <u> </u>
Fee Fee Fee Fee Code (\$) Code (\$)	Fee Desc	wintian	169	900	169	900	(RCE) Request for expedited examination	
	aims in excess of 20	прион	109	200	109	700	of a design application	, ——
102 84 202 42 Independent claims in excess of 3								
er.	IRTOTAL (2)	0.00	(specify) * Reduce	d by	Basic Fili	ng Fee	SUBTOTAL (\$) 110	.00
SUBTOTAL (2) (\$) 0.00 **OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.			paid	-			(3)	
*For Reissues, see above						_	Complete (if application	able)
SUBMITTED BY	<u> </u>	_/	Registrat	ion	35,1	60) 996-6839
Name (Print/Type) Patricia	S. Goddard	1	/No.		33,1		Telephone /	
	MILIA	Todas d	, –				(0/201	/ 2 -
Signature	WWMXX	MUUU				D	Tate $U/O+U$	<u>′</u> ~